

Revised based on amendments adopted through 3-2-16

FISCAL NOTE
LEGISLATIVE FISCAL ANALYST ESTIMATE

ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates)				
	FY 2016-17		FY 2017-18	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS	74,646		84,492	
CASH FUNDS				
FEDERAL FUNDS				
OTHER FUNDS				
TOTAL FUNDS	74,646		84,492	

Any Fiscal Notes received from state agencies and political subdivisions are attached following the Legislative Fiscal Analyst Estimate.

This bill requires the Department of Health and Human Services to designate hospitals as a comprehensive stroke center, primary stroke center or acute stroke-ready hospital and establishes protocols for licensed emergency medical services for treating stroke patients. A stroke system of care task force is established to address matters relating to triage, treatment and transport of stroke patients.

The Department of Health and Human Services indicates the two part-time staff are needed to implement the provisions of the bill. There's no provision for fees in the bill for the stroke designation, so all costs are shown as General Funds.

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

State Agency or Political Subdivision Name:(2) Department of Health and Human Services

Prepared by: (3) Pat Weber

Date Prepared:(4) 3-9-16

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	FY 2016-2017		FY 2017-2018	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS	\$87,680		\$114,907	
CASH FUNDS				
FEDERAL FUNDS				
OTHER FUNDS				
TOTAL FUNDS	\$87,680		\$114,907	

Return by date specified or 72 hours prior to public hearing, whichever is earlier.

Explanation of Estimate:

LB 722 as amended by AM 2126 would require the Department to establish a stroke system of care task force. The Department shall also adopt and distribute a stroke triage assessment tool on the Department's web site.

The Department would need a 0.5 FTE Program Manager I position to establish and support the stroke system of care task force and the additional work to monitor compliance of local EMS service usage of a stroke assessment tool and care protocols. The Department would also require a 0.5 FTE Epidemiology Surveillance Coordinator to deal with requests for data analysis and reporting. An additional \$6,000 is necessary annually to reimburse task force members for travel expenses and for other meeting expenses.

Because this bill as amended does not have an emergency clause, the Department assumes an implementation date of October 1, 2016

MAJOR OBJECTS OF EXPENDITURE

PERSONAL SERVICES:	POSITION TITLE	NUMBER OF POSITIONS		2016-2017	2017-2018
		16-17	17--18	EXPENDITURES	EXPENDITURES
	Program Manager I	0.38	0.50	\$20,115	\$26,820
	Epidemiology Surv Coordinator	0.38	0.50	\$26,820	\$29,390
	Benefits.....			\$13,711	\$18,282
	Operating.....			\$31,811	\$40,415
	Travel.....				
	Capital Outlay.....				
	Aid.....				
	Capital Improvements.....				
	TOTAL.....			\$87,680	\$114,907